

COMMONWEALTH OF KENTUCKY  
UNIFORM CITATION

OFFENDER/VOLANTOR	AGENCY		ORI		COURT	
	NAME: LAST, FIRST, MI, FILIAL		ATTN			
	ALIAS NAME: LAST, FIRST, MI, FILIAL					
	ADDRESS (NUMBER, NAME, SUFFIX)					
	CITY		STATE	ZIP CODE/EXTENSION	KENTUCKY RESIDENT STATUS	
	ID TYPE		ID STATE	ID NUMBER	S.S. NUMBER	KENTUCKY RESIDENT STATUS
	DATE OF BIRTH		SEX	RACE	HEIGHT	WEIGHT
	PLACE OF EMPLOYMENT/OCCUPATION		CITY	STATE	HAIR COLOR	EYE COLOR
	VEHICLE MAKE		VEHICLE MODEL	VEH. YEAR	VEHICLE COLOR	ETHNIC ORIGIN
	VEH. TYPE		REGISTRATION: STATE, YEAR, NUMBER	VEHICLE IDENTIFIERS		ALCOHOL/DRUG INVOLVEMENT
VIOLATION DATE		VIOLATION TIME	EXACT LOCATION OF VIOLATION		MILES DIRECTION	
ARREST DATE		TIME OF ARREST	EXACT LOCATION OF ARREST		MILES DIRECTION	
NUMBER		VIOLATION CODE	ASCF	STATUTE/ORD.	CHARGE(S)	STARTING CASE
POST-ARREST COMPLAINT		Charge 1: SPEEDING 15 MPH OVER LIMIT				
COURT DATE		COURT TIME	COURT LOCATION		YEAR	
COURT CASE NUMBER		TOTAL PREPAYABLE AMOUNT		\$173.00		CONTROL NUMBER
WITNESS 1 NAME: LAST, FIRST, MI, FILIAL		STATE		ZIP CODE		TYPE
WITNESS 1 ADDRESS (NUMBER, STREET, SUFFIX)		CITY				
WITNESS 2 NAME: LAST, FIRST, MI, FILIAL		STATE		ZIP CODE		
WITNESS 2 ADDRESS (NUMBER, STREET, SUFFIX)		CITY				
OFFICER SIGNATURE		BADGE/I.D. NUMBER	ASSIGNMENT		IN-CAR VIDEO FINGERPRINTS PHOTOS EVIDENCE HELD	

Speed Zone

County Name

Citation Number = 09Z1234561

Year + Control Number + Type

Court Date

**PREPAYABLE OFFENSES  
INSTRUCTION SHEET**

This instruction sheet contains important information. Please read in its entirety. Failure to comply with the directions below and make appropriate payment or respond to the citation may result in suspension of your drivers' license.

**PLEA OF GUILTY AND PREPAYMENT OF COURT COST AND FINE(S)**

Many violations are payable prior to the court date. If your citation is marked "payable," you may prepay the court cost and fine(s) by mail or in person. By prepaying, you are pleading guilty to the violation(s) for which you were cited. THE TOTAL AMOUNT FOR COST AND FINE(S) MUST BE RECEIVED AT THE ADDRESS LISTED BELOW BEFORE THE COURT DATE ON YOUR CITATION.

1. Mailed payments should be in the form of a certified check or money order in the amount specified in the payment box and made payable to the Circuit Court Clerk noted below. Do not send cash through the mail. All mailed payments must be post marked at least seven (7) business days prior to the court date on your citation.
2. Payments made in person may be made in the form of cash, certified check or money order. Canadian checks must indicate that payment is in "U.S. dollars."
3. Your citation may be eligible to pay online. To check go to [courts.ky.gov/payments](http://courts.ky.gov/payments).

**PAYMENT OF COURT COST AND FINE(S)**

OFFENSE(S) CITED	FINE AMOUNT
1. 00015 SPEEDING 15 MPH OVER LIMIT	\$ 30.00
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10. Court Cost	\$ 143.00
<b>TOTAL AMOUNT DUE</b>	<b>\$ 173.00</b>

Mail payment and copy of citation to:

**PLEA OF NOT GUILTY AND COURT APPEARANCE**

If you wish to plead not guilty, appear in court on the date written on your citation. FAILURE TO RESPOND TO THE CITATION MAY RESULT IN SUSPENSION OF YOUR DRIVERS' LICENSE.

**STATE TRAFFIC SCHOOL**

If you have a valid drivers license with your current address and have not been assigned to State Traffic School in the last twelve (12) months, you may be eligible. TO REQUEST STATE TRAFFIC SCHOOL, CONTACT THE CIRCUIT COURT CLERK. If you are permitted to attend State Traffic School, you must provide the Circuit Court Clerk a written request to attend State Traffic School, a copy of your citation, and payment for the court costs listed on line 10 in the payment box before your court date. If State Traffic School is ordered, you will be billed an additional fee by the school at a later date.

**Citation Number = 09Z1234561**

Year + Control Number + Type



YEAR	CONTROL NUMBER	TYPE
09	Z123456	1